



Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	10/603,916-Conf. #4349
		Filing Date	June 24, 2003
		First Named Inventor	Jari Malinen
		Examiner Name	J. E. Mattis
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2665	
TOTAL AMOUNT OF PAYMENT	(\$) 1,240.00	Attorney Docket No.	08212/0200293-US0 (NC28794US)

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	<u>Small Entity</u> Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
_____	_____	_____	_____	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>
_____	_____	_____	_____	_____
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	
_____	_____	_____	_____	
_____	_____	_____	_____	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	_____	_____	_____	_____
_____ - 100 = _____ / 50 _____ (round up to a whole number) x _____ = _____				

4. OTHER FEE(S)

	<u>Fees Paid (\$)</u>
Non-English Specification, \$130 fee (no small entity)	
Other (e.g., late filing	1252 Extension for response within second month 450.00
surcharge):	1801 Request for continued examination (RCE) (see 37 ... 790.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	46,900
Name (Print/Type)	Thomas R. Marquis	Telephone	(206) 262-8900
		Date	January 9, 2006



Application No. (if known): 10/603,916

Attorney Docket No.: 08212/0200293-US0
(NC28794US)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV860552498US in an envelope addressed to:

MS RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on January 9, 2006
Date

Signature

Thomas R. Marquis

Typed or printed name of person signing Certificate

46,900
Registration Number, if applicable

(206) 262-8900
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Check in the amount of \$1,240.00
Request for Continued Examination Transmittal (1 page)
Fee Transmittal (1 page)
Petition for Extension of Time Under 37 CFR 1.136(a) (1 page)
Return Receipt Postcard